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| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-------------------------------|----------------------------------|----------------------|---------------------|------------------|
| 09/510,607 | 02/22/2000 | Brian M. Kennedy | 020431.0662 | 2320 |
| | 7590 07/01/200 OGIES US, INC. | 9 | EXAMINER | |
| ONE i2 PLACE, 11701 LUNA ROAD | | | KOPPIKAR, VIVEK D | |
| DALLAS, TX | /3254 | | ART UNIT | PAPER NUMBER |
| | | | 3686 | |
| | | | | |
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| | | | 07/01/2009 | PAPER |

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

| Intonsious Cummons | 09/510,607 | KENNEDY, BRIAN M. | |
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| Interview Summary | Examiner | Art Unit | |
| | VIVEK D. KOPPIKAR | 3686 | |
| All participants (applicant, applicant's representative, PTO | personnel): | | |
| (1) <u>VIVEK D. KOPPIKAR</u> . | (3) | | |
| (2) <u>Steven Laureanti</u> . | (4) | | |
| Date of Interview: <u>6/29/09</u> . | | | |
| Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2 | 2) <mark> applicant's representative</mark> | e] | |
| Exhibit shown or demonstration conducted: d) Yes If Yes, brief description: | e) <u></u> No. | | |
| Claim(s) discussed: all independent claims. | | | |
| Identification of prior art discussed: | | | |
| Agreement with respect to the claims f) was reached. g | ı)∏ was not reached. h)⊠ N | I/A. | |
| Substance of Interview including description of the general reached, or any other comments: <u>The applicant's representations of record.</u> | | | |
| (A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no c allowable is available, a summary thereof must be attached | opy of the amendments that w | | |
| THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERLIE A STATEMENT OF THE SUBSTANCE OF THE INTERQuirements on reverse side or on attached sheet. | last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, | been filed, APP OAYS FROM T WHICHEVER IS | LICANT IS THIS LATER, TO |
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| Vivek D Koppikar/ | | | |

Application No.

Applicant(s)